

SUBSURFACE WASTEWATER DISPOSAL SYSTEM APPLICATION

Maine Dept. of Health & Human Services
Division of Environmental Health, 11 SHS
(207) 287-5672 FAX (207) 287-3165

PROPERTY LOCATION		>> CAUTION PERMIT REQUIRED - ATTACH IN SPACE BELOW <<	
City, Town, or Plantation	LAMOINE	Town/City	LAMOINE
Street or Road	BUTTERMILK ROAD	Permit #	1814
Subdivision, Lot #		Date Permit Issued	9/18/16
		Fee: \$	250.00
		Double Fee Charged []	
OWNER/APPLICANT INFORMATION		Local Plumbing Inspector Signature	
Name (last, first, MI)	TEHENNEPPE, GREGG	L.P.I. # 1040	
Mailing Address of	142 BUTTERMILK ROAD	Owner <input type="checkbox"/> Town <input checked="" type="checkbox"/> State <input checked="" type="checkbox"/>	
Owner <input checked="" type="checkbox"/> Applicant <input type="checkbox"/>	LAMOINE, ME. 04605	The Subsurface Wastewater Disposal System shall not be installed until a Permit is issued by the Local Plumbing Inspector. The Permit shall authorize the owner or installer to install the disposal system in accordance with this application and the Maine Subsurface Wastewater Disposal Rules	
Daytime Tel. #	264-5007 (207) 667-6841	Municipal Tax Map # 9 Lot # 5	
OWNER OR APPLICANT STATEMENT		CAUTION: INSPECTION REQUIRED	
I state and acknowledge that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Department and/or Local Plumbing Inspector to deny a permit.		I have inspected the installation authorized above and found it to be in compliance with Subsurface Wastewater Disposal Rules Application.	
Signature of Owner or Applicant		(1st Date Approved)	
Date		Local Plumbing Inspector Signature	
		(2nd Date Approved)	

PERMIT INFORMATION

TYPE OF APPLICATION <input checked="" type="checkbox"/> 1. First Time System <input type="checkbox"/> 2. Replacement System Type Replaced: _____ Year Installed: _____ <input type="checkbox"/> 3. Expanded System a. < 25% Expansion b. ≥ 25% Expansion <input type="checkbox"/> 4. Experimental System <input type="checkbox"/> 5. Seasonal Conversion	THIS APPLICATION REQUIRES <input checked="" type="checkbox"/> 1. No Rule Variance <input type="checkbox"/> 2. First Time System Variance a. Local Plumbing Inspector Approval b. State & Local Plumbing Inspector Approval <input type="checkbox"/> 3. Replacement System Variance a. Local Plumbing Inspector Approval b. State & Local Plumbing Inspector Approval <input type="checkbox"/> 4. Minimum Lot Size Variance <input type="checkbox"/> 5. Seasonal Conversion Permit	DISPOSAL SYSTEM COMPONENT(S) <input type="checkbox"/> 1. Complete Non-engineered System <input type="checkbox"/> 2. Primitive System (graywater & alt. toilet) <input type="checkbox"/> 3. Alternative Toilet, specify: _____ <input type="checkbox"/> 4. Non-engineered Treatment Tank (only) <input type="checkbox"/> 5. Holding Tank, _____ gallons <input checked="" type="checkbox"/> 6. Non-engineered Disposal Field (only) <input type="checkbox"/> 7. Separated Laundry System <input type="checkbox"/> 8. Complete Engineered System (2000 gpd or more) <input type="checkbox"/> 9. Engineered Treatment Tank (only) <input type="checkbox"/> 10. Engineered Disposal Field (only) <input type="checkbox"/> 11. Pre-treatment, specify: _____ <input type="checkbox"/> 12. Miscellaneous components
SIZE OF PROPERTY _____ sq. ft. 25 acres	DISPOSAL SYSTEM TO SERVE <input checked="" type="checkbox"/> 1. Single Family Dwelling Unit, No. of Bedrooms: 3 <input type="checkbox"/> 2. Multiple Family Dwelling, No. of Units: _____ <input checked="" type="checkbox"/> 3. Other: (SPECIFY) MAN CAVE OVER GARAGE	TYPE OF WATER SUPPLY <input checked="" type="checkbox"/> 1. Drilled Well <input type="checkbox"/> 2. Dug Well <input type="checkbox"/> 3. Private <input type="checkbox"/> 4. Public <input type="checkbox"/> 5. Other: _____
SHORELAND ZONING <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Current Use: <input type="checkbox"/> Seasonal <input checked="" type="checkbox"/> Year Round <input type="checkbox"/> Undeveloped	

DESIGN DETAILS (SYSTEM LAYOUT SHOWN ON PAGE 3)

TREATMENT TANK <input checked="" type="checkbox"/> 1. Concrete (EXISTING, CHECK CONDITION) a. Regular b. Low Profile <input type="checkbox"/> 2. Plastic <input checked="" type="checkbox"/> 3. Other: 3' PUMP TANK CAPACITY 1000 gallons	DISPOSAL FIELD TYPE & SIZE <input checked="" type="checkbox"/> 1. Stone Bed <input type="checkbox"/> 2. Stone Trench <input type="checkbox"/> 3. Proprietary Device _____ a. Cluster Array <input type="checkbox"/> c. Linear b. Regular load <input type="checkbox"/> d. H-20 load <input type="checkbox"/> 4. Other: _____ SIZE 900 sq. ft. <input type="checkbox"/> lin. ft.	GARBAGE DISPOSAL UNIT <input checked="" type="checkbox"/> 1. No <input type="checkbox"/> 2. Yes <input type="checkbox"/> 3. Maybe If Yes or Maybe, specify one below: <input type="checkbox"/> a. Multi-compartment Tank <input type="checkbox"/> b. _____ Tanks in Series <input type="checkbox"/> c. Increase in Tank Capacity <input type="checkbox"/> d. Filter on Tank Outlet	DESIGN FLOW 270 gallons per day BASED ON <input checked="" type="checkbox"/> 1. Table 4A (dwelling unit(s)) <input type="checkbox"/> 2. Table 4C (other facilities) SHOW CALCULATIONS for other facilities
SOIL DATA & DESIGN CLASS PROFILE CONDITION 3 / C at Observation Hole # 1 Depth 18" OF MOST LIMITING SOIL FACTOR	DISPOSAL FIELD SIZING <input type="checkbox"/> 1. Medium -- 2.6 sq. ft./gpd <input checked="" type="checkbox"/> 2. Medium-Large -- 3.3 sq. ft./gpd <input type="checkbox"/> 3. Large -- 4.1 sq. ft./gpd <input type="checkbox"/> 4. Extra Large -- 5.0 sq. ft./gpd	EFFLUENT/EJECTOR PUMP <input type="checkbox"/> 1. Not Required <input checked="" type="checkbox"/> 2. May be Required <input type="checkbox"/> 3. Required Specify only for engineered systems DOSE: _____ gallons	<input type="checkbox"/> 3. Section 4G (meter readings) ATTACH WATER METER DATA LATITUDE AND LONGITUDE at Center of Disposal Area Lat: 44° d 37' m 00" s N Lon: 68° d 22' m 59" s W if g.p.s., state margin of error 30'±

SITE EVALUATOR STATEMENT

I certify that on 4-30-11 (date) I completed a site evaluation on this property and state that the data reported are accurate and that the proposed system is in compliance with the State of Maine Subsurface Wastewater Disposal Rules (10-144A CMR 241)

Site Evaluator Signature	319	5-6-11	9-18-15
WILLIAM A. LABELLE, JR.	SE#	Date	
Site Evaluator Name Printed	Telephone Number	E-mail Address	
	(207) 537-5900	labellesept@rivah.net	

Note: Changes to or deviations from the design should be confirmed with the Site Evaluator.

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Town, City, Plantation

LAMOINE

Street, Road, Subdivision

BUTTERMILK ROAD

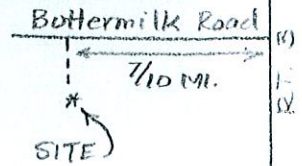
Owner or Applicant Name

GREGG TEHENNEPPE

SITE PLAN

Scale 1" = 60 Ft.

SITE LOCATION PLAN
(Attach map from Maine Atlas
for First Time System Variance)



(SEE ATTACHED SITE PLAN)

SOIL PROFILE DESCRIPTION AND CLASSIFICATION (Location of Observation Holes Shown Above or on pg. 2A)

Observation Hole #1 ☒ Test Pit ☐ Boring
" Depth of organic horizon above mineral soil

Texture	Consistency	Color	Mottling
FINE		VERY DK. GR. BROWN (10 YR 3/2)	
SANDY	FRIABLE	DARK	N.E.
STONY		YELLOWISH	
LOAM	FIRM	BROWN (10 YR 4/6)	FEW FAINT

Soil Profile	Classification Condition	Slope	Limiting Factor	<input checked="" type="checkbox"/> Ground Water <input type="checkbox"/> Restrictive Layer <input type="checkbox"/> Bedrock <input type="checkbox"/> Pit Depth
3	C	6%	18" Depth	

Observation Hole #2 ☒ Test Pit ☐ Boring
" Depth of organic horizon above mineral soil

Texture	Consistency	Color	Mottling
		VERY DK. GR. BROWN (10 YR 3/2)	
SANDY		LT. GRAY (10 YR 7/1)	
STONY	FRIABLE	YELLOWISH BROWN (10 YR 5/8)	
LOAM	FIRM IN PLACE	YELLOWISH BROWN (2.5 Y 6/4)	

Soil Profile	Classification Condition	Slope	Limiting Factor	<input checked="" type="checkbox"/> Ground Water <input type="checkbox"/> Restrictive Layer <input type="checkbox"/> Bedrock <input type="checkbox"/> Pit Depth
3	C	6%	18" Depth	

Site Evaluator's Signature

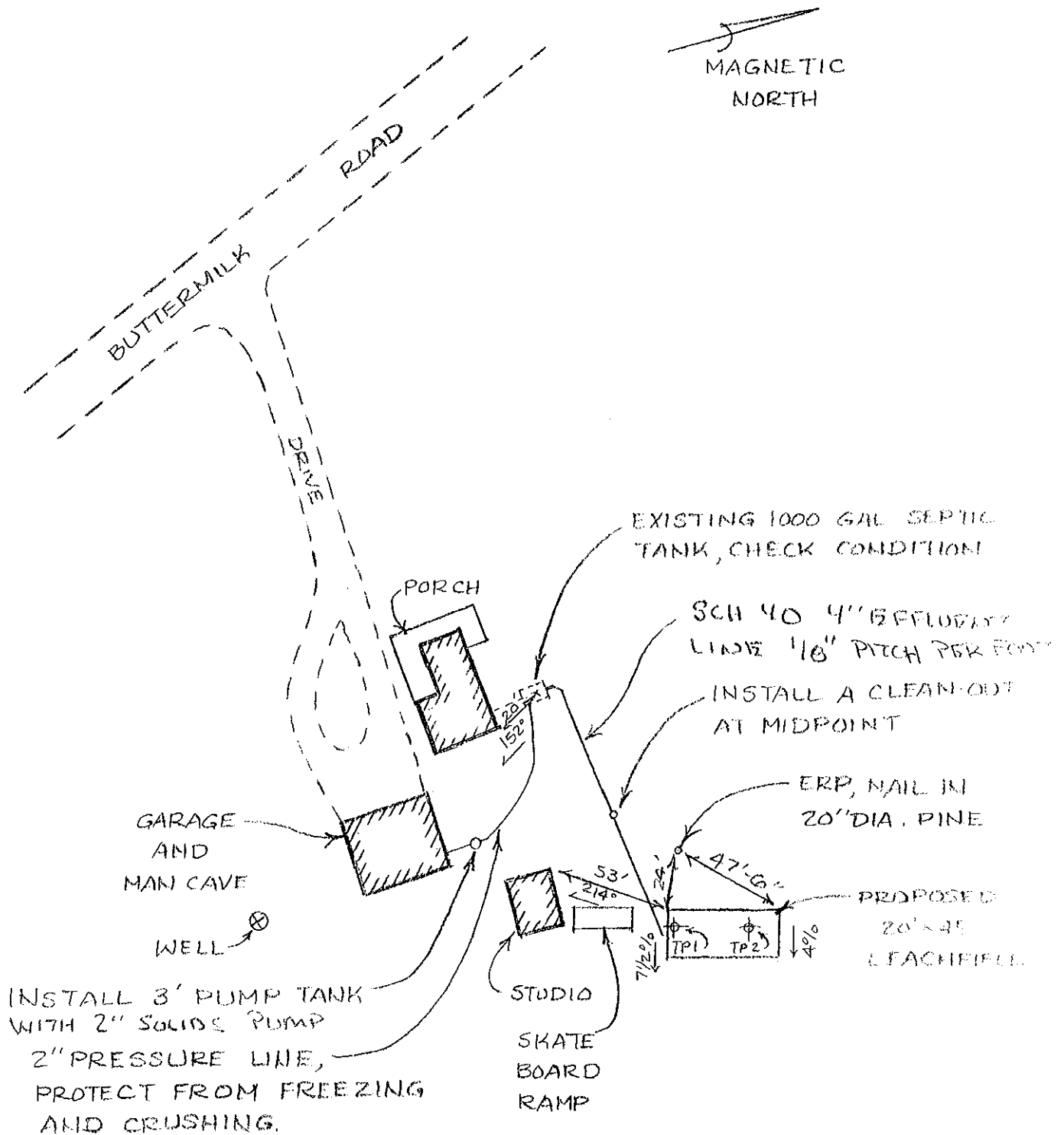
319
S. E. #

5-6-11 9-10-15
Date

Town, City, Plantation LAMOINE	Street, Road, Subdivision BUTTERMILK ROAD	Owner or Applicant Name GREGG TEHENNEPPE
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SITE PLAN:

SCALE: 1" = 60 FT.



W. J. O. 2013

Site Evaluator's Signature

319

S.E. #

9-18-15
5-6-11

Date

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APPROX.

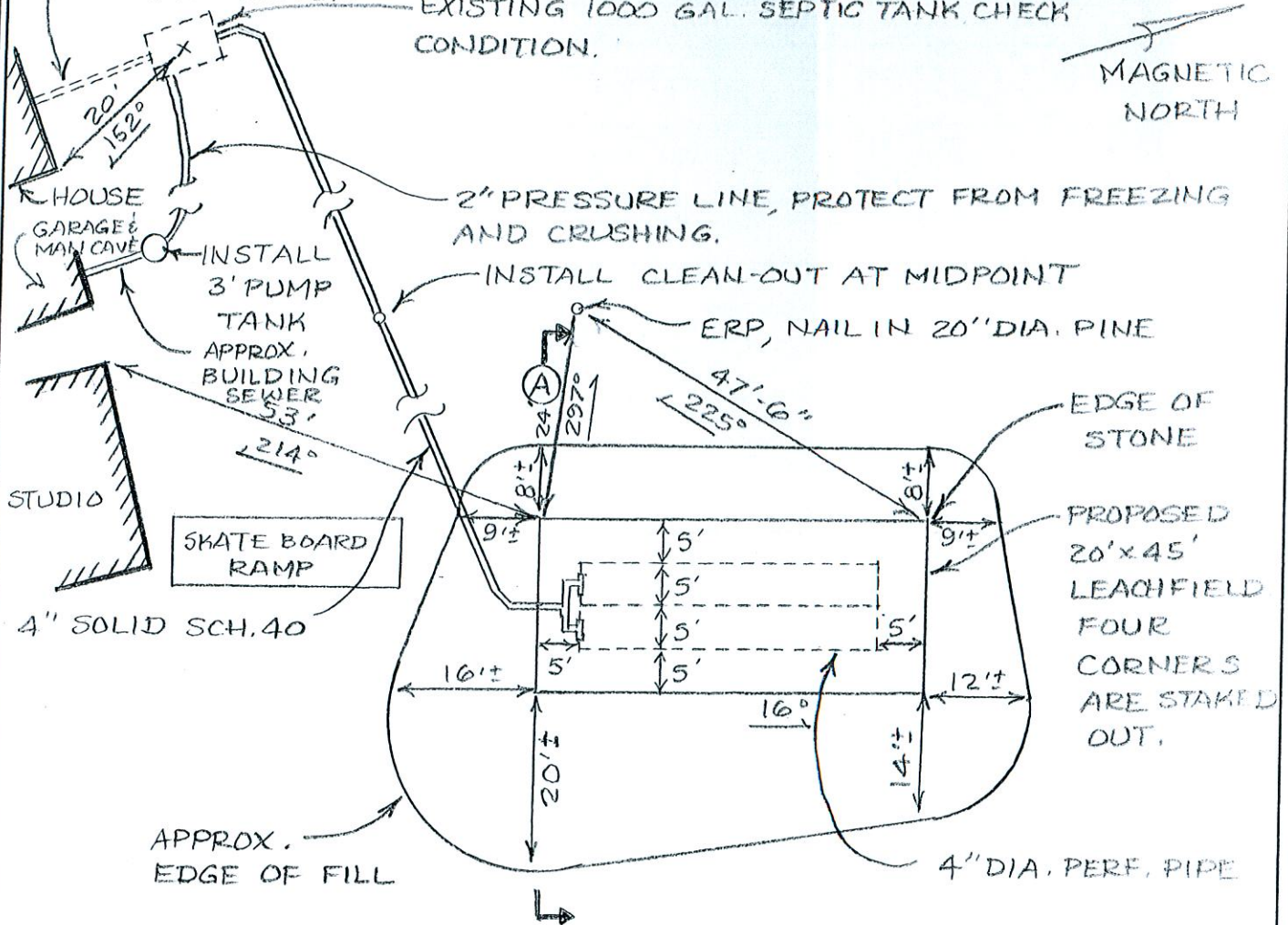
BUILDING SEWER

SUBSURFACE WASTEWATER DISPOSAL PLAN

SCALE: 1" = 20 FT.

EXISTING 1000 GAL. SEPTIC TANK CHECK
CONDITION.

MAGNETIC
NORTH



FILL REQUIREMENTS

Depth of Backfill (Upslope) 18"

Finished Grade Elevation

CONSTRUCTION ELEVATIONS

SYSTEM

PRIVY

ELEVATION REFERENCE POINT

Depth of Backfill (Downslope) 28"-36"

Top of Distribution Pipe or Proprietary Device

-36"

N/A

Location & Description NAIL 26"

Depths @ cross-section shown below or on X-sec. detail.

Bottom of Disposal Field

-49"

-60"

ABOVE GROUND IN 20" DIA.

PINE,
Reference Elevation is: 0"

DISPOSAL AREA CROSS SECTION (SEE ATTACHED CROSS SECTION)

NOTES:

1. GRADE SURROUNDING AREA TO DIVERT SURFACE WATER AWAY FROM SYSTEM.
2. ALL WORK DONE ADJACENT TO WETLANDS AND WATER BODIES MUST BE DONE IN COMPLIANCE WITH SECTION 11-M OF THE SUBSURFACE WASTEWATER DISPOSAL RULES; EROSION AND SEDIMENT CONTROL MEASURES MUST BE IN ACCORDANCE WITH THE MARCH 2003 EDITION OF THE MAINE DEP HANDBOOK "MAINE EROSION AND SEDIMENT CONTROL BMPs" (DEPLW0588).
3. INSTALL SEPTIC TANK RISERS 18" IN DIAMETER "MINIMUM" TO WITHIN 6" OF FINISH GRADE ON INLET, CLEANOUT AND OUTLET COVERS (RECOMMEND EXTENDING RISERS TO FINISH GRADE); INSTALL RISER TO FINISH GRADE OF APPROPRIATE SIZE TO ALLOW PUMP REMOVAL ON ALL IN-TANK PUMP CHAMBERS AND SEPARATE PUMP TANKS.
4. PROTECT LIFT STATION AND PUMP TANKS FROM FREEZING.

Wesley G. 2011

Site Evaluator's Signature

319

S.E. #

5-6-11

Date

9-18-15

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HHE-200 Rev. 02/2011

3 FT.
WIDE
BERM

20 FT.

3 FT.
WIDE
BERM

SCALE : 1" = 5'

Ⓐ

2" COMPRESSED HAY (OR FILTER FABRIC) SEC. 11-F
PLACED OVER STONE.

TOP 4" OF FILL TO BE A GOOD LOAM SOIL MIX TO ESTABLISH A GOOD VEGETATIVE COVER; SEED AND AND MULCH TO PREVENT EROSION, SEC. 11-G.

FILL EXTENSIONS
NO GREATER THAN 4:1,
(25% SLOPE).



12" CLEAN STONE,
(1 1/2" DIA.),
UNIFORM SIZE.

ELEVATIONS:

0

35

49

60

SYSTEM MUST BE INSTALLED ACCORDING TO THE RULES AND PRACTICES SET FORTH IN THE MOST CURRENT VERSION OF THE STATE OF MAINE SUBSURFACE WASTEWATER DISPOSAL RULES. INSTALLATION CONTRACTOR MUST BE FAMILIAR WITH SAID RULES AND CONSTRUCT SYSTEM IN FULL COMPLIANCE WITH SECTION 11 OF SAID RULES.

Alia Q 2577

DATE _____

10-1-00-1-5

TYPICAL CLEAN-OUT
NOT TO SCALE

